

UNITED STATES HOUSE OF REPRESENTATIVES

FORM A

Page 1 of 5

CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

For use by Members, officers, and employees

Henry A. Waxman

202-225-3976

(Full Name)

(Daytime Telephone)

Filer Status

☒ Member of the U.S. House of Representatives

 State: CA
 District: 30

☐ Officer Or Employee

Employing Office:

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "Yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

HAND DELIVERED

(Office Use Only)

2011 JUN -1 PM 4:04

SCHEDULE I - EARNED INCOME

Name

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount

SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name Henry A. Waxman

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain envelope that is appropriately labeled.

Source	Activity	Date	Amount
World Generics Medicines Congress, London, England -videotaping from DC	speech	Feb. 21, 2010	\$2,000
Bank of America Industry Research Healthcare, Washington, D. C.	speech	July 14, 2010	\$2,000
Natl Association of Federal Credit Unions, Arlington, Virginia	speech	September 20, 2010	\$2,000
American Health Insurance Plans, Washington, D. C.	speech	September 16, 2010	\$2,000
GTCBio, Washington, D. C.	speech	November 9, 2010	\$2,000
World Generics Medicine, Washington, D. C.	speech	November 17, 2010	\$2,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry A. Waxman

BLOCK A Asset and/or Income Source <small>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and domestic entities (e.g., an LLC or partnership) that are not publicly traded.</small>	BLOCK B Year-End Value of Asset <small>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</small>	BLOCK C Type of Income <small>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</small>	BLOCK D Amount of Income <small>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</small>	BLOCK E Transaction <small>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</small>
Vanguard European Stock Index (IRA)	None	None	NONE	S
Vanguard REIT Index (IRA)	\$100,001 - \$250,000	DIVIDENDS	\$5,001 - \$15,000	
Vanguard Mid Cap Index (IRA)	\$100,001 - \$250,000	DIVIDENDS	\$1,001 - \$2,500	P
Vanguard Pacific Index Fund (IRA)	None	None	NONE	S
Vanguard Inflation Protection Fund (IRA)	\$15,001 - \$50,000	DIVIDENDS/INTE REST	\$201 - \$1,000	P
Vanguard Total Bond Mkt Fund (IRA)	\$15,001 - \$50,000	INTEREST/CAPIT AL GAINS	\$201 - \$1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry A. Waxman

	Vanguard Total Bond Mkt Fund (Roth IRA)	\$15,001 - \$50,000	INTEREST/CAPITAL GAINS	\$1 - \$200	
JT	Vanguard Emerging Markets Fund	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$15,001 - \$50,000	S(part)
JT	Vanguard European Stock Index Fund	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
JT	Vanguard Extended Market Fund	\$100,001 - \$250,000	DIVIDENDS	\$1,001 - \$2,500	
JT	Vanguard 500 Index Fund	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	
JT	Vanguard Pacific Stock	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
JT	Vanguard Tax Managed International Fund	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	P
JT	Vanguard Prime Money Market Fund	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	PS(part)
SP	Vanguard Small-Cap Index (IRA)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Vanguard Inflation Protection Securities (IRA)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	P
SP	Vanguard Inflation Protection Securities (Roth IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	State of Israel Bonds	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000)
	CALPERS(CA State Retirement)	None	Other: annuity	\$5,001 - \$15,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry A. Waxman

	Vanguard Prime Money Mkt. Fund (IRA)	\$1 - \$1,000	INTEREST	\$1 - \$200	PS(part)
	Vanguard 529 Plan Account #1	\$1,001 - \$15,000	None	NONE	P
	Vanguard 529 Plan Account #2	\$1,001 - \$15,000	None	NONE	P
	Vanguard 529 Plan Account #3	\$1,001 - \$15,000	None	NONE	P

SCHEDULE IV - TRANSACTIONS

Name Henry A. Waxman

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
JT	Vanguard Emerging Markets Fund	S(part)	Yes	11-04-10	\$15,001 - \$50,000
JT	Vanguard Prime Money Market Fund	P	N/A	12-02-10	\$1,001 - \$15,000
JT	Vanguard Prime Money Market Fund	P	N/A	11-04-10	\$15,001 - \$50,000
JT	Vanguard Prime Money Market Fund	S(part)	No	12-22-10	\$1,001 - \$15,000
JT	Vanguard Prime Money Market Fund	P	N/A	07-27-10	\$1,001 - \$15,000
JT	Vanguard Prime Money Market Fund	S(part)	No	09-24-10	\$1,001 - \$15,000
JT	Vanguard Prime Money Market Fund	S(part)	No	08-04-10	\$15,001 - \$50,000
JT	Vanguard Prime Money Market Fund	S(part)	No	09-20-10	\$1,001 - \$15,000
JT	Vanguard Tax Managed International Fund	P	N/A	12-22-10	\$1,001 - \$15,000
JT	Vanguard Tax Managed International Fund	P	N/A	11-04-10	\$15,001 - \$50,000

SCHEDULE IV - TRANSACTIONS

Name Henry A. Waxman

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Vanguard Total Bond Mkt Fund (IRA)	P	N/A	09-14-10	\$15,001 - \$50,000
	Vanguard Mid-Cap Index Fund (IRA)	P	N/A	09-14-10 04-26-10	\$1,001 - \$15,000
	Vanguard Prime Money Mkt. Fund (IRA)	S(part)	No	03-12-10	\$15,001 - \$50,000
	Vanguard Prime Money Mkt Fund (IRA)	S(part)	No	04-26-10	\$1,001 - \$15,000
	Vanguard Pacific Stock Index (IRA)	S(part)	No	04-26-10	\$1,001 - \$15,000
	Vanguard Pacific Stock Index (IRA)	S	No	09-14-10	\$15,001 - \$50,000
SP	Vanguard Inflation Protection Securities (IRA)	P	N/A	every month	\$1,001 - \$15,000
	Vanguard European Stock Index (IRA)	S	No	07-27-10	\$15,001 - \$50,000
	Vanguard 529 Plan Account #1	P	N/A	every month	\$1,001 - \$15,000
	Vanguard 529 Plan Account #2	P	N/A	every month	\$1,001 - \$15,000

SCHEDULE IV - TRANSACTIONS

Name Henry A. Waxman

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Vanguard 529 Plan Account #3	P	N/A	every month	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability

SCHEDULE VI - GIFTS

Name

Report the source, a brief description, and the value of all gifts totaling more than \$335 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Henry A. Waxman

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
Aspen Institute Congressional Program	April 5-11, 2010	DC-Lisbon-DC	Y	Y	Y	none
Aspen Institute Congressional Program	May 30- June 6, 2010	DC-Tunis-Washington	Y	Y	Y	one day
Aspen Institute Congressional Program	August 14- 21, 2010	Los Angeles-Vancouver-DC	Y	Y	Y	two days

SCHEDULE VIII - POSITIONS

Name	
------	--

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX - AGREEMENTS

Name	
------	--

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement